FORM D



U.S. SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

L	OMB_APPROVAL
T	OMB Number: 3235-0076
1	Expires: August 31, 1989

Expires.	August 31	1909
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Prefix	1	Serial

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18		10

		SALCEMEN JOST
Name of Offering (□ check if t	his is an amendment and name has changed, and in	idicate change.)
ACACIA CAPITAL CORP	ORATION	NANY 2 3 2003 >>
Filing Under (Check box(es) that	apply): 🗆 Rule 504 🗆 Rule 505 🖄 Rule 506	□ Section 4(6) □ ULOE
Type of Filing: New Filing	☐ Amendment	
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested	about the issuer	
Name of Issuer (□ check if this	s is an amendment and name has changed, and indic	cate change.)
Acacia Capital Corp	<u>oration</u>	
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
1550 - 625 Howe St.	, Vancouver, BC, V6C 2T6	<u> </u>
	erations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Brief Description of Business		
Tropical Fish and F	Reptile Wholesaler	
		PPOCECOE
Type of Business Organization A corporation	☐ limited partnership, already formed	, warene
•		other (please specify): MAY 27 2002
□ business trust	☐ limited partnership, to be formed	() ·/··· ~ · 2003
,	Month Year	THOMSON
Actual or Estimated Date of Inco	rporation or Organization: 12 00	X Actual ☐ Estimated
Jurisdiction of Incorporation or C	Organization: (Enter two-letter U.S. Postal Service at CN for Canada; FN for other foreign	4 H , I
CENERAL INSTRUCTIONS		

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

2. Enter the information requested for the following:		
• Each promoter of the issuer, if the issuer has been organized within t	he past five years;	
 Each beneficial owner having the power to vote or dispose, or direct t securities of the issuer; 	he vote or disposition of, 10%	or more of a class of equity
Each executive officer and director of corporate issuers and of corporate	e general and managing partne	rs of partnership issuers; and
• Each general and managing partner of partnership issuers.		
Check Box(es) that Apply: Promoter Beneficial Owner Beneficial Owner	cutive Officer X Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)	,	
Miller, Robert M.		
Business or Residence Address (Number and Street, City, State, Zip Code)	
3560 Lido Ct., Calabasas, CA 91302		
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Exe	cutive Officer X Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) Dushnisky, Kelvin		
Business or Residence Address (Number and Street, City, State, Zip Code)	
35 Byron Street, Oakville, Ontario, L6J 6E	á ·	
	ecutive Officer X Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)		
Shon, Ronald C.		
Business or Residence Address (Number and Street, City, State, Zip Code)	
6749 MacDonald Street, Vancouver, British	Columbia, V6N 4G6	
Check Box(es) that Apply:	ecutive Officer X Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)		
Skiptunis, Raymond J.		
Business or Residence Address (Number and Street, City, State, Zip Code)	
2432 Tour Edition Drive, Henderson, NV 89)72	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Ex	ecutive Officer 💢 Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)		······································
Lasky, Michael C.		
Business or Residence Address (Number and Street, City, State, Zip Code		
319 San Rafael Avenue, Belvedere, CA 9492)	
Check Box(es) that Apply: Promoter Beneficial Owner Ex	ecutive Officer	☐ General and/or Managing Partner
Full Name (Last name first, if individual)		
Waldman, Michael B. Business or Residence Address (Number and Street, City, State, Zip Cod	e)	
6847 Oakdale Avenue, Winnetka, CA 91306		
	ecutive Officer Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)		
Miller, Judith R.		
Business or Residence Address (Number and Street, City, State, Zip Cod	e)	

A. BASIC IDENTIFICATION DATA

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

3560 Lido Ct., Calabasas, CA 91302

			10000000 Sun								11,15		
				B. II	VFORMAT	TON ABO	OUT OFFE	ERING		<u> </u>		Yes	No
1. Has	the issuer s	old, or do	es the issu	er intend	to sell, to	non-accred	lited invest	tors in this	offering?				(X
			Ans	wer also i	n Appendi	x, Column	2, if filin	g under U	LOE.				
2. What	is the mir	imum inv	estment th	at will be	accepted f	rom any i	ndividual?	.Nomi	nimum.	requi	red	. \$	
• 5			:-:	h:c .		49						Yes X⊃	No
	the offerin												
sion e to be list th	the informor similar related is an income of the contract of t	emuneration associated the broke	on for soliced person of er or dealer	citation of some of agent of the contract of t	purchasers a broker c than five (in connect or dealer re 5) persons	ion with sa egistered w to be liste	les of secu ith the SE d are asso	rities in the C and/or v	offering. I with a state	lf a persor or states	1 ,	
Full Name	(Last nan	ne first, if	individual)					······································				
וא יייסוא	PPLICA	מודב											
	r Residence		(Number	and Street	, City, Sta	te, Zip Co	ode)						
Name of	Associated	Broker or	Dealer							 			
States in '	Which Pers	on Listed	Has Solici	ited or Int	ends to So	licit Purch	nasers		<u> </u>				
(Check	"All State	s" or chec	k individu	al States)							• • • • • •		States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[[L]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO	-
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] {WI}	[OR] [WY]	[PA PR	-
Full Name	e (Last nar	ne first, if	individua	1)									
Business of	or Residence	ce Address	(Number	and Street	t, City, Sta	ite, Zip Co	ode)		·—				
Name of	Associated	Broker o	r Dealer	·									
States in	Which Per	son Listed	Has Solic	ited or Int	tends to So	olicit Purch	nasers						
(Check	"All State	s'' or che	ck individu	ial States)									States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID	}
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MC	
[MT] [RI]	[NE] [SC]	[NV] [SD]	[HN] [TN]	[NJ] [TX]	[NM] [UT]	{NY} [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	(OK] [WI]	[OR] [WY]	[PA [PR	
	e (Last na												<u></u>
Rusiness	or Residen	ce Addres	(Number	and Stree	t City St	ate Zin C	ode)						
Business	or residen	ee maares	o (r vantoor	u 51700	,, O.O., O.	, <i>L</i> .p C	 ,						
Name of	Associated	Broker o	r Dealer		ζ.								
States in	Which Per	son Listed	l Has Solid	cited or In	tends to Se	olicit Purc	hasers						
(Check	"All State	es" or che	ck individu	ual States)									States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[IL	
[IL] [MT]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD] [NC]	(MA) [ND]	[MI] [OH]	(MN) (OK)	(MS) (OR)	[M0	
[RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC]	[WA]	[WV]	[WI]	[WY]	[P.	

4.7

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Already Type of Security Offering Price Sold 0 Debt s469,516.22 469,516.22 ☐ Common ☐ Preferred Convertible Securities (including warrants) 0 0 Partnership Interests 0 __) \$__ Other (Specify _ \$469,516.22\$ 469,516.22 Answer also in Appendix, Column 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount Investors of Purchases 11 s 469,516.22 Accredited Investors 0 Non-accredited Investors N/A N/ATotal (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of Dollar Amount Security Type of offering Sold N/A N/AN/A N/A Regulation A..... N/AN/A N/A 4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. 500 ___ Transfer Agent's Fees 0 Printing and Engraving Costs \$ 5,000 Legal Fees 0 Accounting Fees 0 Engineering Fees 0 Sales Commissions (specify finders' fees separately)..... 0 Other Expenses (identify) ¥ 5,500

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Total.....

8

C. OFFERING PRICE, NUMBER	OF INVESTORS, EXPENSES AND U	SE OF PRO	CEEDS
b. Enter the difference between the aggregate offertion 1 and total expenses furnished in response to 1 'adjusted gross proceeds to the issuer.'	Part C - Question 4.a. This difference is	the	s <u>464,016.</u> 22
Indicate below the amount of the adjusted gross prused for each of the purposes shown. If the amoun estimate and check the box to the left of the estimate the adjusted gross proceeds to the issuer set forth	nt for any purpose is not known, furnish e. The total of the payments listed must eq	an uai	
the dajasted gross proceeds to the issuer ser forth.	in response to Part C Question in acc	Payment Office Director Affilia	rs, s, & Payments To
Salaries and fees	0	\$	
Purchase of real estate	C	□ \$	🗆 \$
Purchase, rental or leasing and installation of	machinery and equipment	□ \$	🗆 \$
Construction or leasing of plant buildings and	facilities	¥ <u>\$0</u>	X <u>§160,440.</u> 58
Acquisition of other businesses (including the voffering that may be used in exchange for the issuer pursuant to a merger)	assets or securities of another	X \$ <u>268,9</u>	65.50% s 0
Repayment of indebtedness	[⊃ \$	D \$
Working capital	G	¥ \$	0 X \$ 40,110.14
Other (specify):	•	\$	🗆 \$
		□ \$	🗆 \$
Column Totals	È	× \$268,90	<u>65.50</u> ¥ <u>\$ 200,550.</u> 7
Total Payments Listed (column totals added) .		K	\$ <u>464,016.</u> 22
I). FEDERAL SIGNATURE	,	
The issuer has duly caused this notice to be signed by ollowing signature constitutes an undertaking by the isuest of its staff, the information furnished by the iss	ssuer to furnish to the U.S. Securities and	Exchange C	ommission, upon written re-
ssuer (Print or Type)	Signature		Date
Acacia Capital Corporation			May 21, 2003
Name of Signer (Print or Type)	Title of Signer (Print or Type)		*
Ronald C. Shon	Director		

-ATTENTION-----

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. SIAI	E SIGNA	IURE			er e				
. (d)	(a) or (f)	precently	cubiect	to any	of the	disqualificati	on provisions	Vec	No	

1. Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions Yes No of such rule?

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
Acacia Capital Corporation	l l	May 21, 2003
Name (Print or Type)	Title (Print or Type)	
Ronald C. Shon	Director	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

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APPENDIX

1		,	3			4		5	
	Intend to non-a investors	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item1)	Type of investor and amount purchased in State (Part C-Item 2)					fication te ULOE attach ation of granted) -Item1)
				Number of Accredited		Number of Non-Accredited			
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No
AL									
AK									
AZ	ļ	Х	Common Shares	1	\$4,999.93				X
AR									
CA		Х	Common Shares	8	\$411,412.8	5	· · · · · · · · · · · · · · · · · · ·	ļ	X
со									
CT									·
DE						·		<u> </u>	
DC									
FL									
GA									
ĦI		ļ							
ID					·			<u> </u>	
IL								<u> </u>	
IN								<u> </u>	
IA								<u> </u>	ļ
KS		X	Common Shares	2	\$53,103.4	15		ļ	X
KY	<u> </u>	<u> </u>							
LA								<u> </u>	
ME								<u> </u>	
MD								ļ	
MA									
MI								1	
MN									
MS									
МО									

APPENDIX

1	2	2	3			4		5	
	to non-a	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item1)		•				fication te ULOE attach tion of granted) -Item1)
G	.,			Number of Accredited		Number of Non-Accredited			
State MT	Yes	No	,	Investors	Amount	Investors	Amount	Yes	No
NE									
									
NV							·-··		
NH							· · · · · · · · · · · · · · · · · · ·		
NJ		<u> </u>							
NM		 							
NY		<u> </u>							
NC									
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OK								<u> </u>	
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RI	ļ								
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TN		ļ				-		ļ	
TX	 	<u> </u>							
UT	ļ			ļ		 			
VT	ļ	 							
VA									
WA									
wv									
WI	ļ								-
WY		ļ						<u> </u>	
PR									